

The dance of evaluation:

Engaging stakeholders to develop an evaluation framework across a highly diverse training organisation

Presented by Racheal Norris and Dr Linda Klein



GP SYNERGY
advancing medical training



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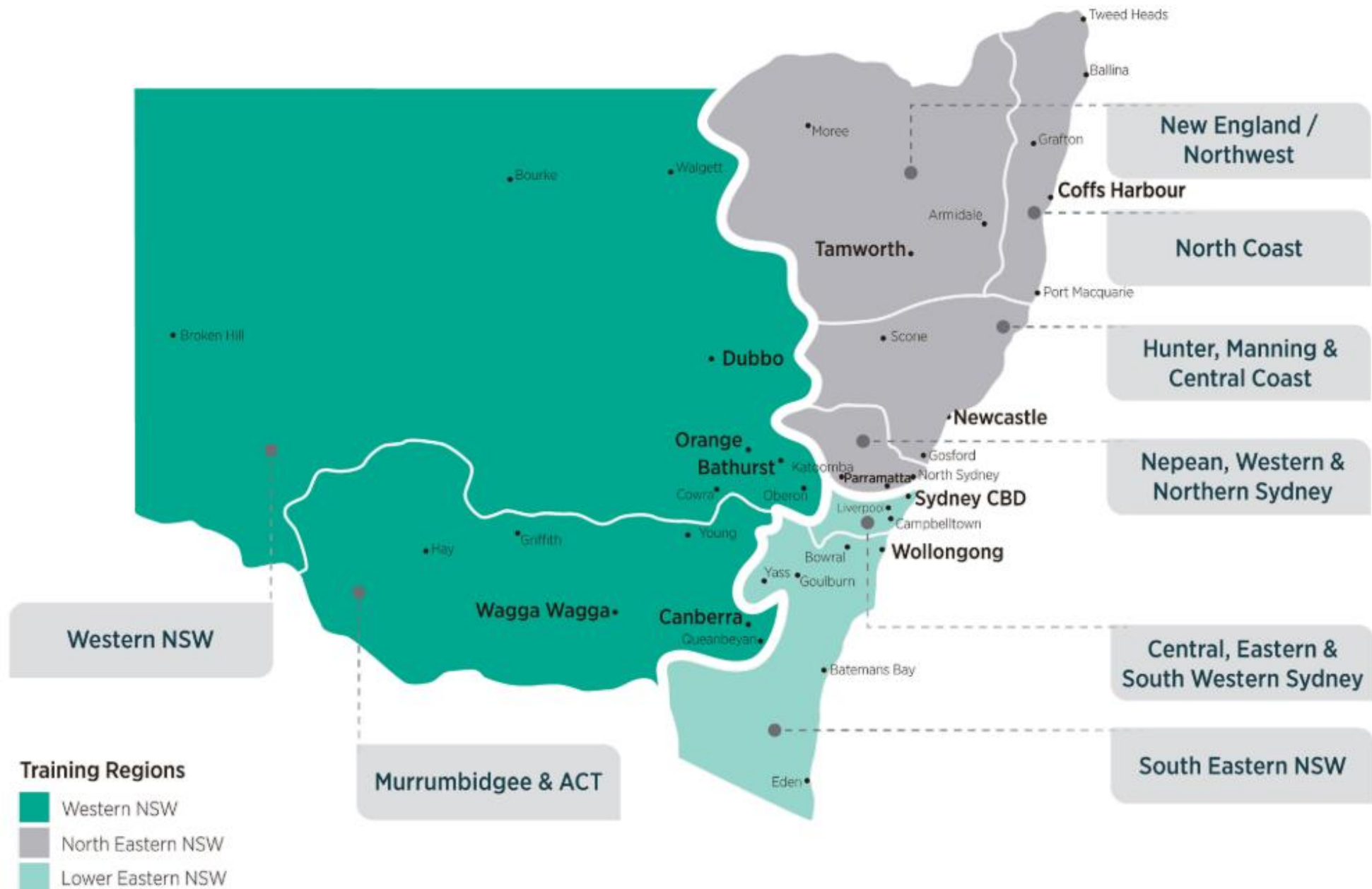
Key questions

- How do we engage with and listen to all stakeholders to develop an overarching framework that is acceptable and useful?
- How do we provide useful evaluation information and teach stakeholders how to use it, whilst developing valid and reliable scales of measurement in the process?

Who is GP Synergy?

- Federally funded provider of Australian General Practice Training program
- Sole Regional Training Provider (RTP) across NSW & ACT since 2016
 - divided into 8 subregions





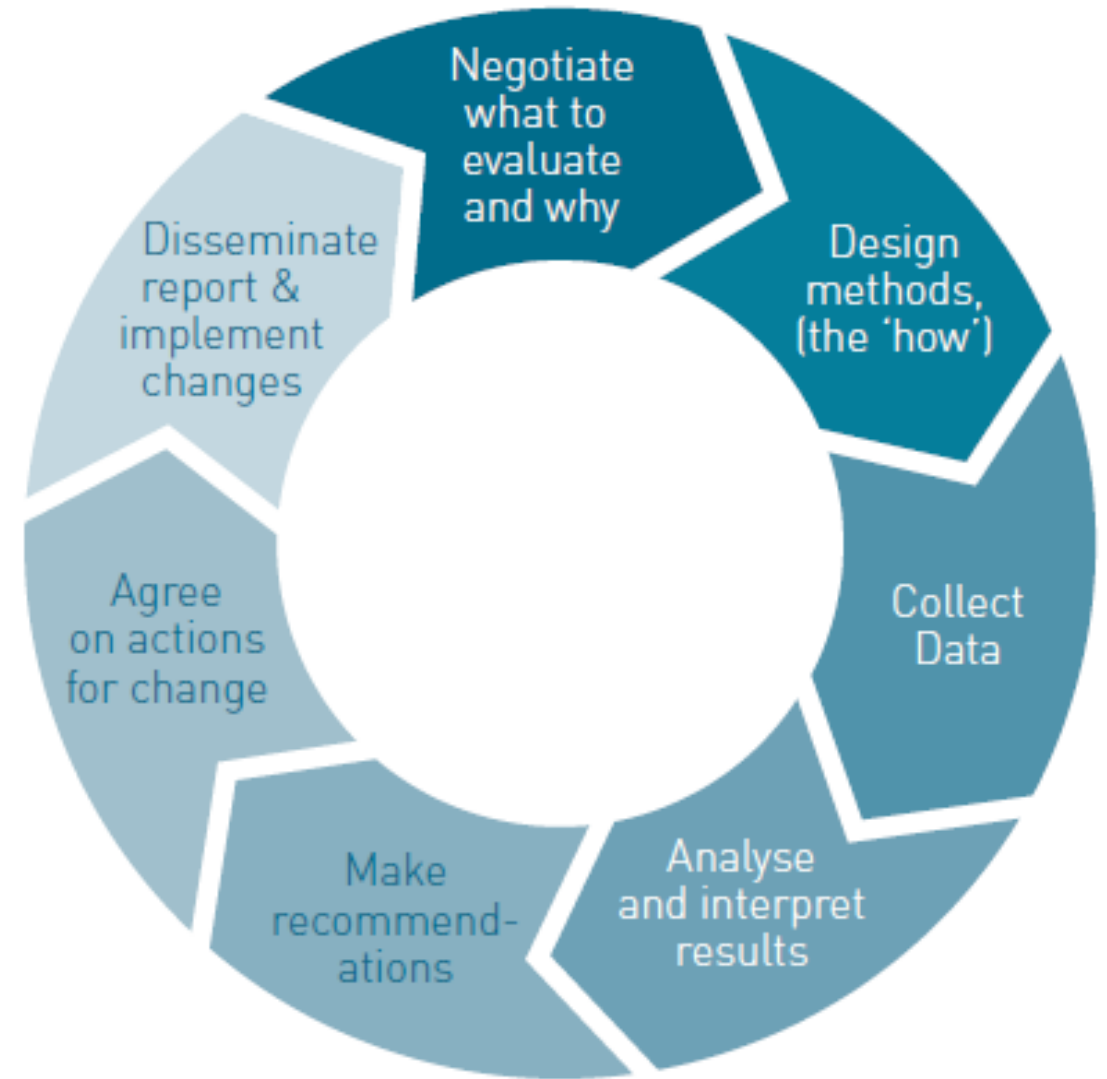
Highly diverse training organisation

- Regional differences in culture and existing work methods.
- Regional differences in training needs
 - 80% centrally-defined topics (curriculum + National Health Priorities)
 - 20% regionally-defined topics.



The evaluation team

- Evaluation team established in 2017
- General aim – to create a rigorous, adaptive system to monitor and report on delivery of educational activities across regions
- Evidence-based, participatory approach



Multi-level stakeholder engagement



Education executive



Medical educators



GP registrars

Engaging with the Education Executive

- Program logic workshop
 - Identify resources and priorities
 - Strengths-based, respectful process
 - Understand overarching culture of organisation
 - Leads to mutually-agreed upon framework



① INPUTS:

- * college curriculum
- * trained staff, workforce
- * CORE, COSE, EE
- * offices, infrastructure (eg phones)
- * supervisors & practices
- * GPrime
- * funding
- * policies + processes
- * relationships with stakeholders
(Dept. Health, RACGP, ACCRM, HETI etc)
universities, LHDs
- * time
- * enormous diverse geographic footprint
- * learning resources
- * registrars
- * Management
- * patients

② ACTIVITIES:

- * orientation
- * workshops/lectures/online teaching (webinars)
- * TAs
- * innovation
- * CTVs
- * placement processes
- * in-practice teaching
- * Exam preparation
- * ^{for} Mediation (funding for special education)
- * Formative assessments
- * "Train the trainer" education (supervisors + MEs)
- * provide resources (SupportGP)
- * Pastoral care
- * curriculum design
- * comply with standards
- * evaluate
- * collaborate with stakeholders
- * attend conferences
- * working groups (special interest groups)
- * advocate
- * close the gap
- * Research

③ OUTPUTS/OUTCOMES:

- * exam results/fellowship
- * registrar self reflection, of improvement, learning skills
- * practices + supervisors reporting improvements
- * competent performance of registrars
- * attendance at workshops
- * meeting learning objectives
- * completion of training requirements
- * high satisfaction levels among registrars & supervisors
- * safely progressing through training
- * goodness-of-fit of registrars + practice in learning needs
- * increasing qualifications &/or competencies of MEs
- * improved supervision skills
- * QA feedback loop

④ IMPACTS:

- * "better doctors"
- * rural retention
- * bicollege accreditation
- * inspiring registrars' professional development (ME, research)
- * company reputation
- * building capacity
- * healthier communities

INPUTS:

- * College curriculum - how to make decisions about what's ^{most} important?
- * Staff - how do we decide the priorities ^{for} capabilities + capacity of workforce?
- * Committees - are they working, informing, integrating?
- * Infrastructure - is it supporting, enabling, sufficient & cost-efficient? (eg GPRs)
- * Supervisors + practices - are they sufficient, at the right standard?
- * Funding - are we using it appropriately, accessing enough of it?
- * Policies + processes - do these align with overarching policies, are they supporting & enabling the work we do?
- * Relationships with stakeholders - are we fostering them, are there clear expectations understood by all?
- * Time - are we using our time in the most efficient + effective way to meet our objectives?
- * Geographic footprint - ~~what~~ is what we're doing equitable?
- * Learning resources - are they appropriate, accessible, affordable? (value for money?)
- * Registrars - are they suitable?
- * Management - supportive, enabling, efficient, is communication sufficient + effective?
- * Patients - is the registrar seeing enough/to many patients of adequate diversity?

ACTIVITIES

Workshops / lectures

- Correct mix of speakers?
- " mix of modes of delivery?
- ~~What~~ mode of delivery consistent with L.O?
- CTVs - Were CTV visitors approp. trained?
- Were CTVs carried out at approp. times in training?
- Are Sup. consulted during/after CTVs (closing the gap/loop)?
- Are reports accessible + rego are aware of them?

Supervisors

- Engaged in supervision?
- Are sups contactable?
- Meeting training requirements?
- Attending sup. Prof. dev. program
- ~~Are~~ Should sup. attendance to Prof. dev. program be mandatory?

Collaborate with Stakeholders

- Are we talking to right Stakeholders?
- Have we got right people in both org talking at same table?
- Are all meetings minuted with clear action points? That then get to right people in both organisations?

Formative Assessment

- Do we have too many or not enough?
- Is content + delivery appropriate to stage of training?
- Have we assembled the right people to create to right/intended asset?
- What is purpose for the particular assess?
- How smoothly is it delivered?
- How do we know its valid?

Working Group

- Do have agenda? Keep minutes?
- Are recommendations passed on to appropriate arm within org?
- Are right people on W.G?
- Do we have the structure + personnel correct?

PLANNING LEARNING

- At every TA does ME ask?
- " " CTV " visitor "?
- How well do ALL MEs know to ask?
- Are we providing them with some appropriate tools to facilitate in their planning of their learning?

Outputs/Outcomes

- What is percentage pass rate in each 3 segments of each ^{exam} exam session (from ^{second} second attempt)?
- What % GPR pass all 3 segments on 1st attempt?
- What % 1.M.G. pass all 3 segments on 1st attempt?
- What % GPR create Red flags for Competency Assessments? (the definition of red flag)
- What % GPR have NOT completed 144 hrs w/Shop training by end of ~~Q1~~ GPT2/PART2?
- What is participant Satisfaction rate?
- Is there a difference between satisfaction levels between cohorts of GPR.
- What is the number of complaints by ED staff, GPs, GPR?

4. Data / processes

- What % of regions are ^{correct} "red" or "green"?
- What % were G? What % were R?
- Both doctors - What is regulatory body reported? (How do you DEFEND?)
- Inspiring ongoing PD - Where are they from post-fellowship?
- What are they doing " " " "
- How many reg. SV + training practices are there in an area?

- * College curriculum - how to make decisions about what's ^{most} important?
- * Staff - how do we decide the priorities for capabilities + capacity of workforce?
- * Committees - are they working, informing, integrating?
(eg Grims)
- * Infrastructure - is it supporting, enabling, sufficient & cost-efficient?
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3. Outputs/Outcomes Φ .

- What % is percentage poor rate in each ^{quadrant}?
- 3 segments of each exam section from ^{quadrant} - segments according to content?
- What % GPR poor across all 3 segments?
- What % IMG poor across all 3 segments on 1st attempt?
- What % GPR receive Red flags for Competency Assessments? (for different years?)
- What % GPR have NOT completed 144 hrs w/ship training last 3y end of ~~2014~~ CPT2 / PRRT 2?
- What is S participant Satisfaction rate?
- Is there a difference between Satisfaction levels between cohorts of GPR.
- What is the number of complaints GPR; GPR;

- Is there consistency of ^{teaching} ~~practice~~ across regions?
- What proportion of GPR are ~~not~~ directly placed?
- How many extensions for training are approved?

4. Impacts ϕ

- What % of reg. voters will be ^{correct} \rightarrow what % will be Q? \rightarrow what % will be R?
- Better doctors - What % regulatory body reported
- How to you DEFEND ^{the} \rightarrow Inspiring ongoing PD - where are they Sys post-fellows up?
- What are they do " " +
- How many reg. SV + training practical can live in an area?

Other Questions?

How well are we delivering the reg education program?

Engaging with the Education Executive cont.

- Ongoing presence at meetings.
- Regular and ad hoc reporting.



Engaging with the Medical Education team

- Building rapport
 - Respecting existing culture and systems
 - Maintaining contact over time
- Designing evaluation tools
 - Standardised surveys to measure key outcomes across regions
 - Semi-automated process for timely reporting
 - Responsive to regional need



Engaging with the Medical Education team cont.

- Capacity building
 - Defending crucial balance of quantitative and qualitative data
 - Guiding interpretation of feedback for continuous improvement



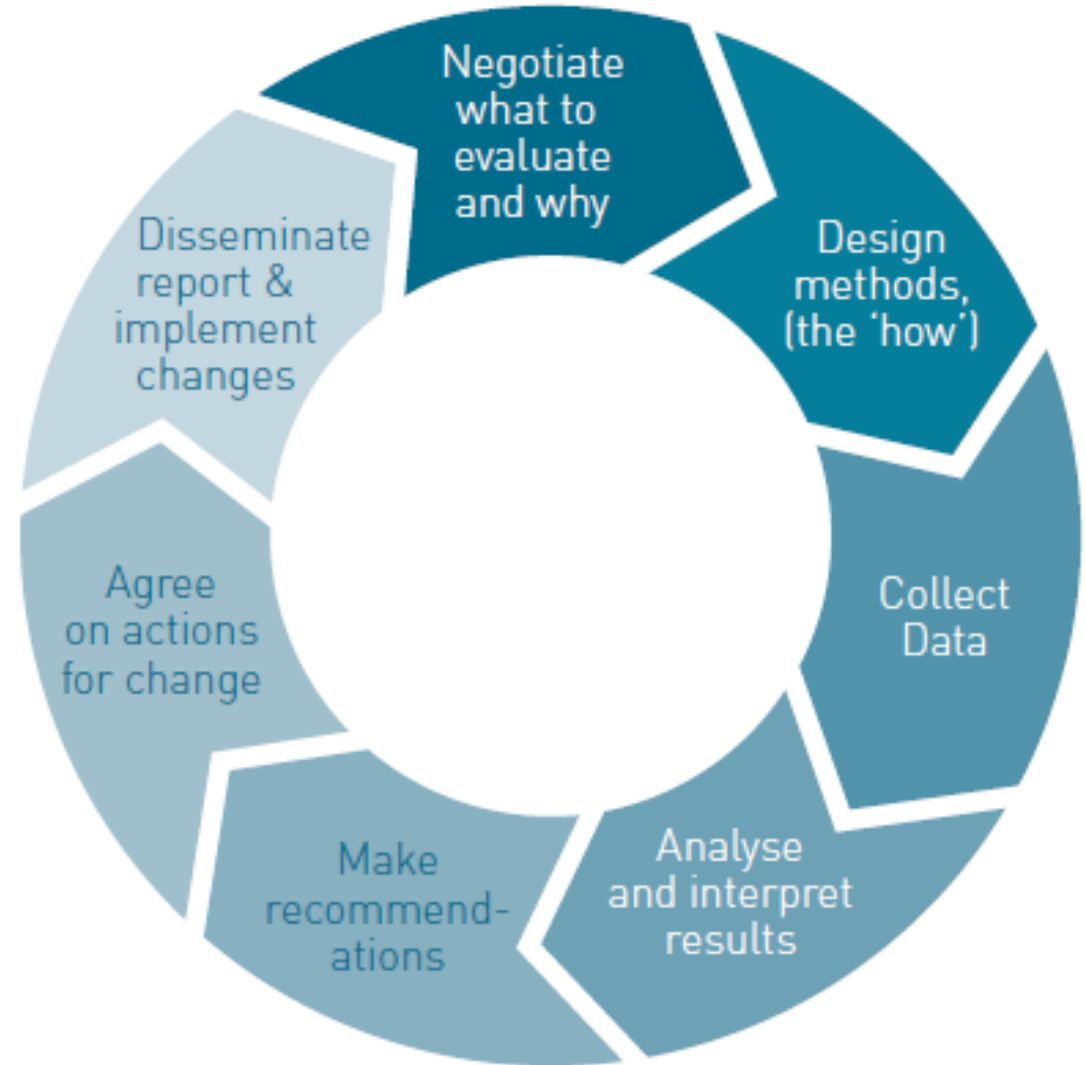
Engaging with GP registrars

- The Great Evaluation Tour of 2017 – consultation across regions
 - “Closing the loop”: How do they want to hear about evaluation findings?
 - Education of our theoretical framework and how to provide constructive feedback
- Ongoing communication
 - Updates in session
 - Newsletter
 - Social media



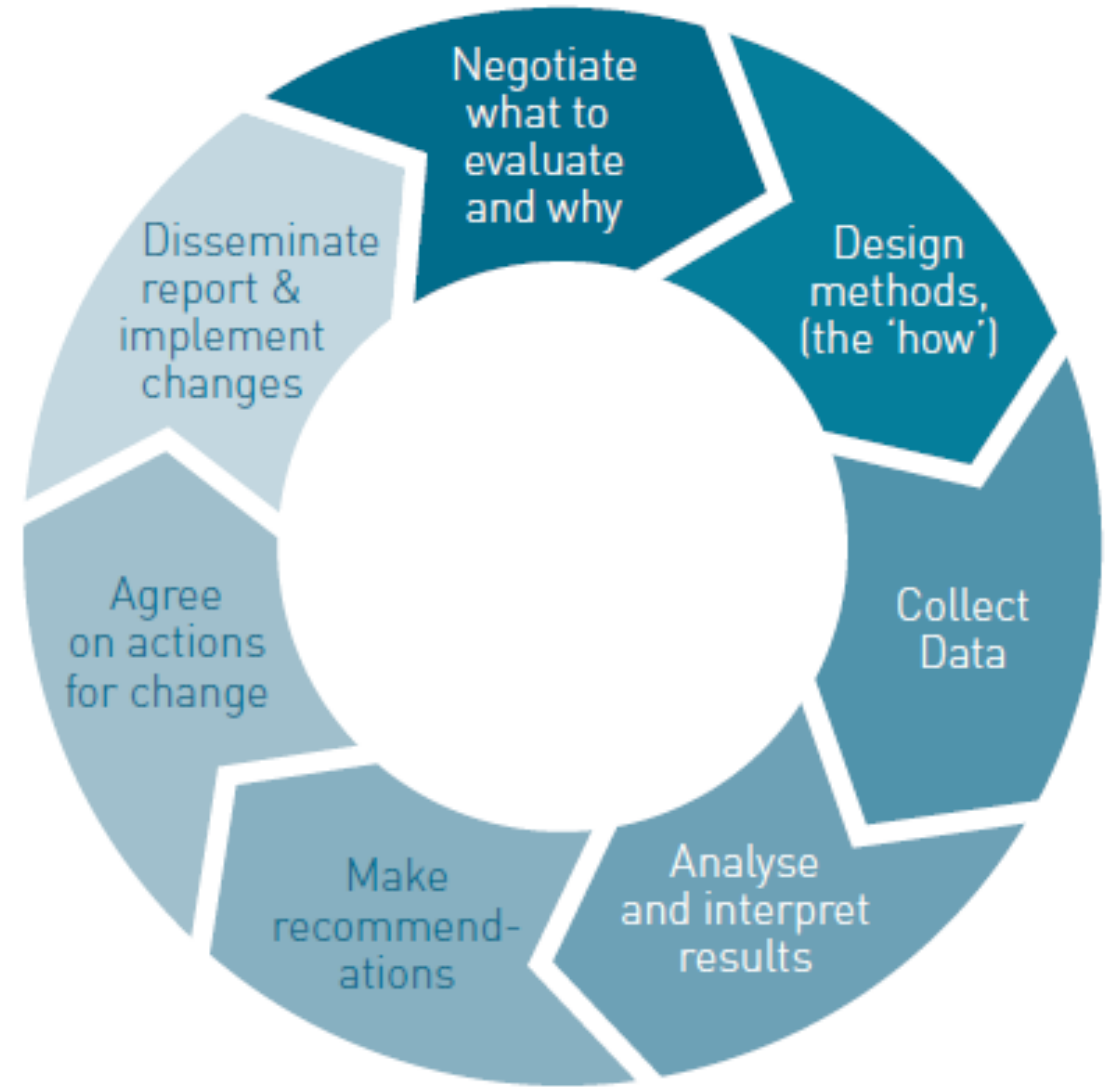
Where to from now?

- Ongoing engagement
 - Focus groups
 - Video vignettes at start of workshops
 - Medical Educator webinars and resources
- Consolidating framework
 - Pulling together guidelines and processes within an overarching document



Where to from now?

- Refining processes
 - Consolidating report writing scripts
 - Updating manual of report generation and dissemination
- Impact evaluation
 - Looking beyond immediate outcomes





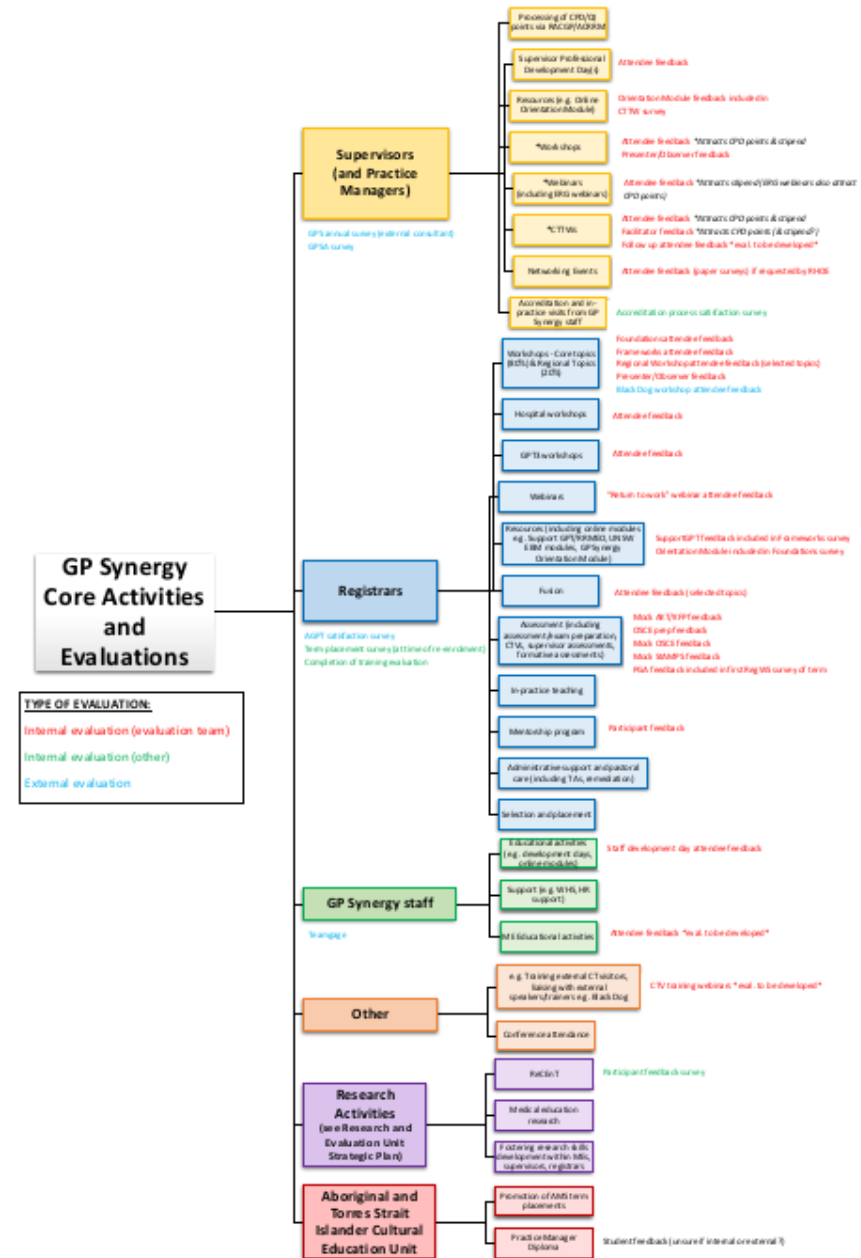
Key tips

Things we have learned that are transferrable across disciplines:



Communicate – check in regularly with stakeholders, and be flexible in how you reach them.

Create a map – find out what other types of evaluations are going on across your company/project (and keep up communication here too)





Acknowledge it is all a work in progress, and keep notes of ideas for improvement as you go.

Accept feedback on the feedback – and be willing to make changes.





Get your hands dirty –
know what you are
evaluating.

Know what you can and
can't change.





Questions